

PERSONAL FINANCIAL STATEMENT

FORM PFS - LOCAL

COVER SHEET

PAGE 1

Note: A PFS filed with the Texas Ethics Commission must be filed electronically. The only exception is for individuals appointed to office. See the PFS Instruction Guide for more information.

Filed in accordance with chapter 572 of the Government Code.
For filings required in 2026, covering calendar year ending December 31, 2025.
Use FORM PFS-INSTRUCTION GUIDE when completing this form.

TOTAL NUMBER OF PAGES FILED

8

Filer ID

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt #

Amount \$

Date Processed

Date Imaged

1 NAME

TITLE: FIRST, MI

County Judge PETER

NICKNAME: LAST, SUFFIX

SAKAI

2 ADDRESS

ADDRESS / PO BOX, APT / SUITE #: CITY, STATE, ZIP CODE

P.O. Box 15395
San Antonio, TX 78212

3 TELEPHONE
NUMBER

AREA CODE

PHONE NUMBER, EXTENSION

[REDACTED]

4 REASON
FOR FILING
STATEMENT

☐ CANDIDATE

(INDICATE OFFICE)

☒ ELECTED OFFICER

County Judge

(INDICATE OFFICE)

☐ OTHER

(INDICATE POSITION)

5 Family members whose financial activity you are reporting (see instructions).

SPOUSE

RAQUEL M. DIAS-SAKAI

DEPENDENT CHILD 1.

2.

3.

In Parts 1 through 20, you will disclose your financial activity during the preceding calendar year. In Parts 1 through 14 and 20, you are required to disclose not only your own financial activity, but also that of your spouse or a dependent child (see instructions).

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

PERSONAL FINANCIAL STATEMENT

COVER SHEET
PAGE 2

On this page, indicate any Parts of Form PFS that are not applicable to you. If you do not place a check in a box, then pages for that Part must be included in the report. **If you place a check in a box, do NOT include pages for that Part in the report.**

6 PARTS NOT APPLICABLE TO FILER

- ☐ N/A Part 1A - Sources of Occupational Income
- ☒ N/A Part 1B - Retainers
- ☒ N/A Part 2 - Stock
- ☐ N/A Part 3 - Bonds, Notes & Other Commercial Paper
- ☒ N/A Part 4 - Mutual Funds
- ☒ N/A Part 5 - Income from Interest, Dividends, Royalties & Rents
- ☐ N/A Part 6 - Personal Notes and Lease Agreements
- ☐ N/A Part 7A - Interests in Real Property
- ☒ N/A Part 7B - Interests in Business Entities
- ☒ N/A Part 8 - Gifts
- ☒ N/A Part 9 - Trust Income
- ☒ N/A Part 10A - Blind Trusts
- ☒ N/A Part 10B - Trustee Statement
- ☒ N/A Part 11A - Ownership of Business Associations
- ☒ N/A Part 11B - Assets of Business Associations
- ☒ N/A Part 11C - Liabilities of Business Associations
- ☒ N/A Part 12 - Boards and Executive Positions
- ☒ N/A Part 13 - Expenses Accepted Under Honorarium Exception
- ☒ N/A Part 14 - Interest in Business in Common with Lobbyist
- ☒ N/A Part 15 - Fees Received for Services Rendered to a Lobbyist or Lobbyist's Employer
- ☒ N/A Part 16 - Representation by Legislator Before State Agency
- ☒ N/A Part 17 - Benefits Derived from Functions Honoring Public Servant
- ☒ N/A Part 18 - Legislative Continuances
- ☒ N/A Part 19 - Contracts with Governmental Entity
- ☒ N/A Part 20 - Bond Counsel Services Provided by a Legislator

SOURCES OF OCCUPATIONAL INCOME

PART 1A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and do NOT include this page in the report.**

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1	INFORMATION RELATES TO	☒ FILER	☐ SPOUSE	☐ DEPENDENT CHILD _____
2	EMPLOYMENT	NAME AND ADDRESS OF EMPLOYER / POSITION HELD Bexar County Bexar County Courthouse 101 W Nueva, 10th floor San Antonio, Texas 78204		
	☒ EMPLOYED BY ANOTHER			
	☐ SELF-EMPLOYED	NATURE OF OCCUPATION County Judge		
	INFORMATION RELATES TO	☐ FILER	☒ SPOUSE	☐ DEPENDENT CHILD _____
	EMPLOYMENT	NAME AND ADDRESS OF EMPLOYER / POSITION HELD RETIRED		
	☐ EMPLOYED BY ANOTHER			
	☐ SELF-EMPLOYED	NATURE OF OCCUPATION RETIRED		
	INFORMATION RELATES TO	☐ FILER	☐ SPOUSE	☐ DEPENDENT CHILD _____
	EMPLOYMENT	NAME AND ADDRESS OF EMPLOYER / POSITION HELD		
	☐ EMPLOYED BY ANOTHER			
	☐ SELF-EMPLOYED	NATURE OF OCCUPATION		

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

BONDS, NOTES & OTHER COMMERCIAL PAPER

PART 3

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and do NOT include this page in the report.**

List all bonds, notes, and other commercial paper held or acquired by you, your spouse, or a dependent child during the calendar year. If sold, indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 DESCRIPTION OF INSTRUMENT	<i>Invesco Government Money Market</i>
2 HELD OR ACQUIRED BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____
3 IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN \$11,120 ☐ \$11,120 - \$22,239 ☐ \$22,240 - \$55,609 ☐ \$55,610 OR MORE
DESCRIPTION OF INSTRUMENT	<i>J.P. Morgan Liquor Assets Money Market</i>
HELD OR ACQUIRED BY	☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD _____
IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN \$11,120 ☐ \$11,120 - \$22,239 ☐ \$22,240 - \$55,609 ☐ \$55,610 OR MORE
DESCRIPTION OF INSTRUMENT	<i>PGIM Government Money Market</i>
HELD OR ACQUIRED BY	☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD _____
IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN \$11,120 ☐ \$11,120 - \$22,239 ☐ \$22,240 - \$55,609 ☐ \$55,610 OR MORE

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1 DESCRIPTION OF INSTRUMENT	Sunflower Bank C.D.
2 HELD OR ACQUIRED BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____
3 IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN \$11,120 ☐ \$11,120 - \$22,239 ☐ \$22,240 - \$55,609 ☐ \$55,610 OR MORE
DESCRIPTION OF INSTRUMENT	
HELD OR ACQUIRED BY	☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____
IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN \$11,120 ☐ \$11,120 - \$22,239 ☐ \$22,240 - \$55,609 ☐ \$55,610 OR MORE
DESCRIPTION OF INSTRUMENT	
HELD OR ACQUIRED BY	☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____
IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN \$11,120 ☐ \$11,120 - \$22,239 ☐ \$22,240 - \$55,609 ☐ \$55,610 OR MORE

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PERSONAL NOTES AND LEASE AGREEMENTS

PART 6

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and do NOT include this page in the report.**

Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of *more than* \$2,220 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	<i>Roundpoint Mortgage LLC</i>
2 LIABILITY OF	☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD _____
3 GUARANTOR	<i>N/A</i>
4 AMOUNT	☐ \$2,220--\$11,119 ☐ \$11,120--\$22,239 ☐ \$22,240--\$55,609 ☒ \$55,610 OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	
LIABILITY OF	☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____
GUARANTOR	
AMOUNT	☐ \$2,220--\$11,119 ☐ \$11,120--\$22,239 ☐ \$22,240--\$55,609 ☐ \$55,610 OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	
LIABILITY OF	☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____
GUARANTOR	
AMOUNT	☐ \$2,220--\$11,119 ☐ \$11,120--\$22,239 ☐ \$22,240--\$55,609 ☐ \$55,610 OR MORE

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INTERESTS IN REAL PROPERTY

PART 7A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and do NOT include this page in the report.**

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 HELD OR ACQUIRED BY	☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD _____
2 STREET ADDRESS ☐ NOT AVAILABLE	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE <i>See below</i>
3 DESCRIPTION ☒ LOTS ☐ ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 
4 NAMES OF PERSONS RETAINING AN INTEREST ☐ NOT APPLICABLE (SEVERED MINERAL INTEREST)	<i>PETER SAKAI</i> <i>RAPUEL M. DIAS-SAKAI</i>
5 IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN \$11,120 ☐ \$11,120 - \$22,239 ☐ \$22,240 - \$55,609 ☐ \$55,610 OR MORE

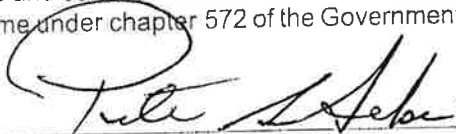
HELD OR ACQUIRED BY	☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____
STREET ADDRESS ☐ NOT AVAILABLE	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE
DESCRIPTION ☐ LOTS ☐ ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED
NAMES OF PERSONS RETAINING AN INTEREST ☐ NOT APPLICABLE (SEVERED MINERAL INTEREST)	
IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN \$11,120 ☐ \$11,120 - \$22,239 ☐ \$22,240 - \$55,609 ☐ \$55,610 OR MORE

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PERSONAL FINANCIAL STATEMENT SIGNATURE PAGE

The law requires the personal financial statement to be verified. The verification page must have the signature of the individual required to file the personal financial statement; it must be verified by either being signed in front of a notary or the filer must also fill out the unsworn declaration. Without proper verification, the statement is not considered filed.

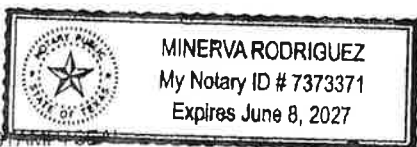
I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, 2025, and is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code.



Signature of Filer

Please complete either option below:

(1) Affidavit



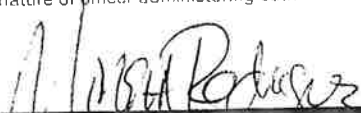
NOTARY PUBLIC

Sworn to and subscribed before me by Peter Sakai this the 12th day of February, 2026, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath



Minerva Rodriguez

Notary

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____

My address is _____ (street) _____ (city) _____ (state) _____ (zip code) _____ (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____ (month) (year)

Signature of Filer (Declarant)



VG-203-2026-20260016613

File Information

**FILED IN THE OFFICIAL PUBLIC RECORDS OF BEXAR COUNTY
LUCY ADAME-CLARK, BEXAR COUNTY CLERK**

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Recorded Date: February 12, 2026
Recorded Time: 3:03 PM
Total Pages: 9
Total Fees: \$0.00

**** THIS PAGE IS PART OF THE DOCUMENT ****

**** Do Not Remove ****

Any provision herein which restricts the sale or use of the described real property because of race is invalid and unenforceable under Federal law

STATE OF TEXAS, COUNTY OF BEXAR

I hereby Certify that this instrument was FILED in File Number Sequence on this date and at the time stamped hereon by me and was duly RECORDED in the Official Public Record of Bexar County, Texas on:
2/12/2026 3:03 PM



Lucy Adame-Clark
Lucy Adame-Clark
Bexar County Clerk